2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# P05000060528

Entity Name: TURNING POINT HEALTHCARE STRATEGIES, INC.

Current Principal Place of Business:

4206 VANITA COURT
WINTER SPRINGS, FL 32708

New Principal Place of Business:

555 WINDERLEY PLACE
SUITE 300
MAITLAND, FL 32751

Current Mailing Address:

4206 VANITA COURT
WINTER SPRINGS, FL 32708

New Mailing Address:

555 WINDERLEY PLACE
SUITE 300
MAITLAND, FL 32751

FEI Number: 01-0834173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOUFFARD, DIANE
4206 VANITA COURT
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

BOUFFARD, DIANE H
555 WINDERLEY PLACE
SUITE 300
MAITLAND, FL 32751 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DIANE H. BOUFFARD 04/17/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BOUFFARD, DIANE H
Address: 4206 VANITA COURT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BOUFFARD, DIANE H
Address: 555 WINDERLEY PLACE, SUITE 300
City-St-Zip: MAITLAND, FL 32751 US

Title: CEO ( ) Change (X) Addition
Name: BOUFFARD, STEVEN M
Address: 555 WINDERLEY PLACE, SUITE 300
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE H BOUFFARD P 04/17/2006
Electronic Signature of Signing Officer or Director Date